| eas                                     | e print or type.   |   |   |                                    |  |                       |               |   | Form                 | Approved.   | OMB No. 2     | 050-0039      |
|---|--|---|---|------------------------------------|--|-----------------------|---------------|---|----------------------|-------------|---------------|---------------|
|   | UNIFORM HAZARDOU<br>WASTE MANIFEST   | AVD580138246  | ì .   | 2. Page 1 of <b>1</b>              | See Blo  | ock 14                | below         | 4. Maplifest T                                |                      | <b>5029</b> | 95 JJ         | K             |
|   | 5. Generator's Name and M.<br>Alaskan Copp<br>P.O. Box 3541<br>Seattle, WA 9<br>Generator's Phone: | er VVorks<br>6<br>18124-3546  | Phone:<br>206-382-8379  |                                    | Generator's Site<br>Alaskan<br>3200 Si<br>Seattle, | Copp<br>xth Av        | er Worl       | outh<br>546                                   | -                    |             |               |               |
|   | 6. Transporter 1 Company N   | YOU RESON   | RCES IN   | C                                  |  |                       | ·•            | U.S. EPA ID N                                 | 000                  | 00 72       | 37            |               |
|   | 8. Designated Facility Name<br>World Resour<br>8113 West Sh<br>Tolleson, AZ (                      | nerman Street   | Phone:<br>(602) 233 916   | 8                                  |  |                       |               | U.S. EPAID N                                  |                      | 5500        | -             |               |
| -                                       | Facility's Phone:  9a. 9b. U.S. DOT Desc and Packing Group   | ription (including Proper Shipping Na   | me, Hazard Class, ID Number,  | ,                                  | ļ  | 10. Contain           | ners<br>Type  | 11. Total<br>Quantity                         | 12. Unit<br>Wt./Vol. | 13.         | Waste Codes   |               |
| GENERALON                               | 1 1141   | 7, Hazardous waste, so  | lid, n.o <sub>.</sub> s.  |                                    | Ø  | DI.                   | CF            | 1703  | P                    | F006        |               |               |
| ֡֝֞֝֝֞֝֝֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓֓ | 2.   |   |   |                                    |  |                       |               | ·   |                      |             |               |               |
|   | 3.   |   |   |                                    |  |                       |               |   |                      |             |               |               |
|   | 4  |   | 2018  |                                    |  |                       |               |   |                      |             |               |               |
|   | Actual L   | ctions and Additional Information  e:ght Rece;  |   |                                    |  | Call                  | INFOT         | NCY CO<br>RAC at: 1-<br>ny name <sup>in</sup> | -800-5               | 35-5053     |               | າກລກປ່        |
|   | 15. GENERATOR'S/OFF marked and labeled/p   | 1 1 4 2 8 5<br>EROR'S CERTIFICATION: I hereby<br>lacarded, and are in all respects in p<br>the contents of this consignment con<br>minimization statement identified in | roper condition for transport as<br>form to the terms of the attach | ccording to appl<br>ned EPA Acknow | licable internatioi<br>vledament o <b>#</b> Co     | nai and nat<br>nsent. | ionai governi | nental regulations.                           | nipping nam          | nipment and | i am the Prim | ary           |
| 1.                                      | Generator's/Offeror's Printe   | A Than Dow  | , [   |                                    | gnature  | Port of er            | ntry/exit:    |   | •                    |             | onth Day      | Year<br>- 1/8 |
| ER IN                                   | Transporter signature (for a<br>17. Transporter Acknowleds<br>Transporter 1 Printed/Type           | ment of Receipt of Materials  |   | . Si                               | gnature  | Date leav             |               |   | /                    | M           | onth Day      | Year          |
| KANSPORIER                              | Transporter 2 Printed/Type   | E. ELA153   | , m   |                                    | gnature  | - 2                   | 2 24          | 26 L  |                      |             | onth Day      | Year          |
| =                                       | 18. Discrepancy  |   |   |                                    |  |                       |               |   | " #                  |             |               |               |
|   | 18a. Discrepancy Indication  | n Space Quantity  | Туре  |                                    |  | esidue                | e Number:     | Partial Re                                    | ejection             |             | Full Rej      | ection        |
| FACILI 1                                | 18b. Alternate Facility (or C  | Generator)  |   |                                    |  |                       |               | U.S. EPA ID                                   | Number               |             |               |               |
| DESIGNATED FACILITY                     | 18c. Signature of Alternate 19. Hazardous Waste Rep  | Facility (or Generator) ort Management Method Codes (i.e.   | , codes for hazardous waste tr                                      | reatment, dispo                    | sal, and recycling                                 | g systems)            |               |   |                      |             | Month Da      | y Year        |
| <b>一</b><br>医                           | ,  |   | r <sub>sk</sub>   | 3.                                 |  |                       |               | 4.  |                      |             |               |               |
|   | Printed/Typed Name   | Armando 2-17) Previous editions are obs   | Chavez  |                                    | Signature  | 9.                    | no            | - س   | m/                   | ACILITY     | Month Da      | 1118          |

| 000                 | e print or type.  |  |   |  |  |   |  |                                  | Form                 | Approved.                             | OMB No. 20  | 50-0039              |
|---------------------|---|--|---|--|--|---|--|----------------------------------|----------------------|---------------------------------------|-------------|----------------------|
| _                   |   | 1. Generator ID Number WAD980738546  |   | 1  | See  | ncy Response F<br>Bl <b>oc</b> k 14                       | below                                    | 4. Manifest Ti                   |                      | 7029                                  | 5 JJ        | K                    |
|                     | Generator's Name and Mailing<br>Alaskan Copper<br>P.O. Box 3546<br>Seattle, WA 981<br>Generator's Phone:          | VVOTKS   | Phone:<br>206-382-8379                                    |  | Alask<br>3200                                | s Site Address (it<br>kan Coppe<br>Sixth Ave<br>tle, WA 9 | er Work<br>enue Sc                       | outh<br>546                      |                      |                                       | 3-          |                      |
| ľ                   | 5. Transporter 1 Company Name   | ON RESOIR  | CES IN  | c  |  |   |  | U.S. EPA ID NO<br>U.S. EPA ID NO | 0000                 | 9072                                  | 37          |                      |
| ŀ                   | B. Designated Facility Name and   | I Site Address   |   |  |  |   | <del></del>                              | U.S. EPA ID N                    | umber                |                                       |             |                      |
|                     | World Resource<br>8113 West Sher<br>Tolleson, AZ 85<br>Facility's Phone:  | man Street   | Phone:<br>(602) 233 916                                   | 6  |  |   |  | AZD9                             | 8073                 | 5500                                  |             |                      |
|                     |   | on (including Proper Shipping Name,  | Hazard Class, ID Number,                                  |  |  | 10. Contain   | ers<br>Type                              | 11. Total<br>Quantity            | 12. Unit<br>Wt./Vol. | 13. \                                 | Waste Codes |                      |
| GENERALOR           | 11101   | Hazardous waste, solid   | , n.o,s.  |  | (  | pp I  | CF                                       | 1703                             | P                    | F006                                  |             |                      |
| DEN.                | 2.  |  |   |  |  |   |  |                                  |                      |                                       |             |                      |
|                     | 3.  |  |   |  |  | ·   |  |                                  |                      |                                       |             |                      |
|                     | 4.  |  |   |  |  |   |  | NCY CO                           |                      |                                       |             |                      |
|                     | P.O.#M  15. GENERATOR'S/OFFERC marked and labeled/place Exporter, I certify that the I certify that the waste min | is and Additional information  2.9 + ReCe; Vi  142885  IN'S CERTIFICATION: I hereby de inded, and are in all respects in propontents of this consignment conforminization statement identified in 40 | clare that the contents of the condition for transport at | nis consignmen<br>ccording to app<br>ned EPA Ackno<br>irge quantity ge | vicable inter<br>wiedgment (<br>enerator) or | Use<br>nd accurately de-<br>national and nati             | compa<br>scribed abov<br>onal government | rental regulations.              | World                | Resource, and are cla                 | ces Con     | aged,                |
| <u> </u>            | Generator's/Offeror's Printed/Ty  Control  16. International Shipments  | Han Day  |   | Export from  | ignature<br>U.S.                             | Port of en  | itry/exit:                               |                                  |                      |                                       | 21/7        | -1/8                 |
| E                   | Transporter signature (for exportant and a signature)  17. Transporter Acknowledgment                             | orts only):  | - y   |  | n bejan                                      | Date leavi  | ing U.S.:                                |                                  | ·                    | · · · · · · · · · · · · · · · · · · · |             |                      |
| TRANSPORTER         | Transporter 1 Printed/Typed Na Transporter 2 Printed/Typed N  | me K. KL1/53   | W   |  | ignature<br>ignature                         | for 2   | - 50                                     | la Tr                            |                      | 1                                     | onth Day    | Year<br>/ 28<br>Year |
| TRA                 |   | Sac. 3   |   |  |  |   |  | <del>*</del>                     |                      |                                       |             |                      |
| $\uparrow$          | 18. Discrepancy  18a. Discrepancy Indication Sp   | pace Quantity  | Туре  |  | M  | Residue   | e Number:                                | Partial Re                       | ejection             |                                       | Full Re     | ection               |
| FACILITY            | 18b. Alternate Facility (or General Facility's Phone:   | 3  |   |  |  |   |  | U.S. EPA ID                      | Number               |                                       | Acath S     | V                    |
| DESIGNATED FACILITY | 18c. Signature of Alternate Fa<br>19. Hazardous Waste Report  | cility (or Generator)<br>Management Method Codes (i.e., co   | xdes for hazardous waste t                                |  |  | cycling systems)  |  |                                  |                      |                                       | Month Da    | y Year               |
| l<br>H              |   | 2.   | † a   | 3  |  | :   |  | 4.                               |                      |                                       |             |                      |
|                     | Printed/Typed Name  | or Operator: Certification of receipt  | of hazardous materials co<br>have 2                       |  | Cianatura                                    | ept as noted in Ite<br>Anno                               |  | h EN                             | m                    | N                                     | Month Da    | y Year               |
| ₽                   | <u> </u>  | 7) Previous editions are obsole  |   | L  |  |   |  |                                  | NATED                | FACILITY                              | TO GEN      | ERATO                |

| Ple                 | ease print or type. (Form designed for use on elite (12-pitch) typewr  |  |   |   |                              |   |                      | n Approved. OME                         | 3 No. 2050-0039  |
|---------------------|--|--|---|---|------------------------------|---|----------------------|---|--|
| 1                   | UNIFORM HAZARDOUS 1. Generator ID Number WASTE MANIFEST VAD 880738546  | 2.   | Page 1 of 3                             | Emergency Response See Block 14   |                              | 4. Manifest                             | Tracking N           | umber<br>4110                           | JJK  |
| $\  \ $             | 5. Generator's Name and Mailing Address  | I_   | _ 4                                     | enerator's Site Address   |                              | an mailing addres                       | SS)                  | T ada eda U                             | UUIN   |
|                     | Alaskan Copper Works 3200 Sixth Avenue South Seattle WA 98124 20   | ione:<br>6-382-8379                                    |   |   |                              | ·                                       | ,                    |   |  |
| Ш                   | Generator's Phone: 6. Transporter 1 Company Name   | n. 902. 451.0  |   |   |                              | U.S. EPA ID N                           | dumber               |   |  |
| Ш                   | Actin Person   |  |   |   |                              |   | -                    | 000                                     | 777  |
|                     | 7. Transporter 2-Company Name  |  |   |   |                              | U.S. EPA ID N                           | lumber               |   |  |
| Ш                   | 8. Designated Facility Name and Site Address   |  | *************************************** |   |                              | U.S. EPA ID N                           | lumber               | 1.00                                    | ·  |
|                     |  | ione:<br>12) 233 9166                                  |   |   |                              | AZD9                                    | 9807 <sup>5</sup> 3  | 5500                                    |  |
|                     | 9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazar and Packing Group (if any))   | rd Class, ID Number,                                   |   | 10. Contain<br>No.  | ers<br>Type                  | 11. Total<br>Quantity                   | 12. Unit<br>Wt./Vol. | 13. Waste                               | Codes  |
| GENERATOR -         | X RQ, NA3077, Hazardous waste, solid<br>(F008), 9, III   | d, n.o.s.  |   | OPL.  | CF                           | 1140                                    | P                    | F008                                    | . The second sec |
| EN I                | 2.   |  | ·                                       |   |                              |   |                      | *************************************** | 100000   |
|                     | 3.   |  |   |   |                              |   |                      |   |  |
|                     | 4.   |  |   |   |                              |   |                      |   | 1  |
|                     | 14. Special Handling Instructions and Additional Information  Actual Weight Received-  | 1058 Lbs   |   | lEMi  | ERGEI                        | CY CO                                   | NTAC                 |   |  |
|                     | P.O. # MI42397   | )  |   | Call  | NFOTR                        | IAC at: 1-                              | 800-53               |   | `mmanni  |
|                     | <ol> <li>GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare the<br/>marked and labeled/placarded, and are in all respects in proper condi<br/>Exporter, I certify that the contents of this consignment conform to the</li> </ol> | ition for transport according terms of the attached FF | ng to applicabl<br>PA Acknowleds        | fully and accurately designate international and national and national and national and national areas of Consent | cribed above<br>nal governme | by the proper shi<br>ental regulations. | nning name           | and are classified                      | nackanad   |
|                     | I certify that the waste minimization statement identified in 40 CFR 26<br>Generator's/Offeror's Printed/Typed Name  | iz.z/(a) (ii i am a iarge qu                           | iantity general<br>Signati              |   | quantity gen                 | erator) is true.                        |                      | Month                                   | Day Year   |
| 1                   | MARC BRUNIE  |  | 10/1                                    | 1 1 1 22  | 1                            |   |                      | 19 1                                    | F 1/6  |
| INT.                | 16. International Shipments Import to U.S.   | □ Ex <sub>l</sub>                                      | port from U.S.                          | Port of entr  |                              | į.                                      |                      |   |  |
| <del> </del>        |  | <del></del>  |   | Date leavin   | g U.S.:                      |   |                      |   |  |
| TRANSPORTER         | Transporter 1 Pfinted/Typed Name   |  | Signatu                                 | re re   |                              |   |                      | Month                                   | Day Year   |
| SPC                 | »Kur ////lu  |  |   | 16/6  |                              | ner.                                    |                      | 171                                     | t 1/5-   |
| RAN                 | Transporter 2 Printed/Typed Name   |  | Signatu<br>I                            | re  |                              |   |                      | Month                                   | Day Year   |
| <u>⊢</u>            | 18. Discrepancy  |  |   |   | ·                            |   |                      |   |  |
|                     | 18a. Discrepancy Indication Space Quantity   | Туре   |   | Residue   |                              |   |                      |   |  |
|                     | - Substituty   | т туре   |   | L Residue   |                              | Partial Reje                            | ction                | L! Fu                                   | Il Rejection   |
| -<br>ح              | 18b. Alternate Facility (or Generator)   |  |   | Manifest Reference I  | Number:                      | =51.15.11                               |                      | <u>'</u>                                |  |
| 등                   |  |  |   | • •   |                              | U.S. EPA ID N                           | umber                |   |  |
| FA                  | Facility's Phone:  |  |   |   |                              | 1                                       |                      |   |  |
| TED                 | 18c. Signature of Alternate Facility (or Generator)  |  | <del></del>                             |   |                              | <u> </u>                                |                      | Month                                   | Day Year   |
| GN                  | 40 Useraday West Decet Message - Maile 40 La G   |  |   |   |                              |   |                      |   |  |
| DESIGNATED FACILITY | 19. Hazardous Waste Report Management Method Codes (i.e., codes for h. 1.  | azardous waste treatmen                                | t, disposal, ar                         | d recycling systems)  |                              | 4.                                      |                      |   |  |
| 7                   | HOIO   |  | Ĭ.                                      |   |                              | 7.                                      |                      |   | .*   |
|                     | 20. Designated Facility Owner or Operator: Certification of receipt of hazard  | lous materials covered by                              | the manifest                            | except as noted in Item   | 18a                          |   |                      |   |  |
|                     | Printed/Typed Name Armanda Cha   | 109  | Signatu                                 |   |                              | 12 1                                    | ,                    | Month                                   | Day Year   |
| <b>♥</b><br>EPA     | A Form 8700-22 (Rev. 3-05) Previous editions are obsolete.   | VE Z   |   | dom   |                              | John S.                                 | B                    | 191                                     | 12.18  |
|                     | ( )  |  |   |   | D!                           | LSIGNATE                                | D FACI               | LITY TO GE                              | NERATOR  |

| 1 100             | ise prir   | nt or type. (Form designed for use on elite (12-pi   | tch) typewriter.)   |  |  |   |                     |   |                             | n Approved.  | OMB No. 2                                      | 050-0039   |
|-------------------|--|--|---|--|--|---|---------------------|---|-----------------------------|--|--|--|
| 1                 |  | FORM HAZARDOUS 1. Generator ID Number ASTE MANIFEST 1. Generator ID Number 1. Generator ID  | 46  | 2. Page 1 of   |  | gency Response<br>Block 14                                    |                     | 4. Manifest                               | Tracking N                  | 644.   | 5 JJ   | K  |
|                   | S  | nerator's Name and Mailing Address Naskan Copper Works O. Box 3546 Seattle, WA 98124-3546 rator's Phone:   | Phone:<br>206-362-6371  |  | Ala:<br>320  | or's Site Address (<br>Liken Copp<br>O Sixth Au<br>ttle, WA 9 | er Wor<br>enus S    | ks<br>outh<br>546                         |                             |  |  |  |
|                   |  | nsporter 1 Ompany Name   | 450 W   | CES  | •<br>•   |   |                     | U.S. EPA ID N                             | lumber                      | 0000   | .723   | 37   |
|                   |  | signated Facility Name and Site Address  |   |  |  |   |                     | U.S. EPA ID N                             | lumber                      |  |  |  |
|                   | 8  | Vorld Resources Company<br>113 West Sherman Street<br>olleson, AZ 85353<br>y's Phone:  | Phone:<br>(602) 233 91  | 36   |  |   |                     | AZD!                                      | 9807,0                      | 5500   |  |  |
|                   | 9a.<br>HM  | 9b. U.S. DOT Description (including Proper Shipping and Packing Group (if any))  | ***   | er,  |  | 10. Contain<br>No.  | ers<br>Type         | 11. Total<br>Quantity                     | 12. Unit<br>Wt./Vol.        | 13. \  | Vaste Codes                                    |  |
| GENERATOR -       | X  | 1 RQ, NA3077, Hazardous was<br>(F006), 8, III  | de, solid, n.c.s.   |  | r  | pp1   | CF                  | 1396                                      | þ                           | F008   |  | over freike van velder skippendikkelike van  |
| - GEN             |  | 2.   |   |  |  |   |                     |   |                             |  | ones e de deserva                              |  |
|                   |  | 3.   | •   |  |  |   |                     |   |                             | 7 10 | BACTER AND | TO THE STREET OF |
|                   | ÷  | 4.   |   |  |  |   |                     |   |                             |  |  | e e e e e e e e e e e e e e e e e e e  |
|                   | 14. Sp   | pecial Handling Instructions and Additional Information  | ad-1,301 Lb   | 5.   |  | EM  | ERGE                | NCY CO                                    | NTAC                        |  |  |  |
|                   | ,  | 0.4m141953   |   |  |  | Call  | INFOTI              | RAC at: 1-<br>ry name 1                   | 800-53                      |  | es Com   | pany   |
|                   |  | GENERATOR'S/OFFEROR'S CERTIFICATION: I here  | by declare that the contents of the proper condition for transport    | this consignment a   | able inte  | rnational and natio   | nal governm         | e by the proper sh<br>nental regulations. | ipping name<br>If export sh | e, and are classipment and I a   | sified, packa                                  | ged,<br>ry   |
|                   | n  | marked and labeled/placarded, and are in all respects in<br>Exporter, I certify that the contents of this consignment o  | conform to the terms of the attac                                     | hed EPA Acknowle   | edgment<br>vrator) or  | of Consent.   | l auantity aa       | nerator) is true                          |                             |  |  | 1  |
|                   | E<br>n   | marked and labeled/placarded, and are in all respects ir   | conform to the terms of the attac                                     | thed EPA Acknowle<br>arge quantity gene                          | edgment<br>erator) or<br>nature  | of Consent.<br>(b) (if I am a small                           | I quantity ger      | nerator) is true.                         |                             | Mon  | th Day   | Year   |
|                   | General<br>General   | marked and labeled/placarded, and are in all respects in<br>Exporter, I certify that the contents of this consignment of<br>certify that the waste minimization statement identified<br>ator's/Offeror's Printed/Typed Name  | conform to the terms of the attac                                     | thed EPA Acknowle<br>arge quantity gene                          | erator) or   | of Consent<br>(b) (if I am a small                            | l quantity ger      | nerator) is true.                         |                             | Mon  | . ජ  | Year<br>  18   |
| INT'L +           | General<br>General<br>16. Into   | marked and labeled/placarded, and are in all respects in<br>Exporter, I certify that the contents of this consignment of<br>certify that the waste minimization statement identified<br>ator's/Offeror's Printed/Typed Name  | conform to the terms of the attac                                     | thed EPA Acknowle<br>arge quantity gene                          | erator) or<br>nature   | of Consent. (b) (if I am a small  Port of entr                | ry/exit:            | nerator) is true.                         |                             |  | th Day   |  |
|                   | General Services 16. Interpretation 17. Transport  | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment of certify that the waste minimization statement identified rator's/Offeror's Printed/Typed Name  CACL HOMESON Import to U.S. porter signature (for exports only):  ansporter Acknowledgment of Receipt of Materials  | conform to the terms of the attac                                     | ched EPA Acknowle<br>arge quantity gene<br>Sign                  | erator) or<br>nature<br>.S.  | (b) (if I am a small  | ry/exit:            | nerator) is true.                         |                             |  | ු   ජි   | <i>i</i> 8   |
|                   | General Services 16. Interpretation 17. Transport  | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment of certify that the waste minimization statement identified rator's/Offeror's Printed/Typed Name  CACL HOMDSOCIA  THOMDSOCIA  Ternational Shipments Import to U.S. porter signature (for exports only):   | conform to the terms of the attac<br>in 40 CFR 262.27(a) (if I am a I | ched EPA Acknowle<br>arge quantity gene<br>Sign                  | erator) or<br>nature   | (b) (if I am a small  | ry/exit:            | nerator) is true.                         | 7                           |  | 8<br>  Day,                                    | Year   |
|                   | General Services 16. Interest 17. Transport  | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment of certify that the waste minimization statement identified rator's/Offeror's Printed/Typed Name  CACL HOMESON INTERPRETATION INTER | conform to the terms of the attac                                     | ched EPA Acknowle<br>arge quantity gene<br>Sign<br>Export from U | erator) or<br>nature<br>.S.  | (b) (if I am a small  | ry/exit:            | nerator) is true.                         | 4                           |  | B Bay  | <i>i</i> 8   |
| TRANSPORTER       | General Section 17. Transport  | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment certify that the waste minimization statement identified ator's/Offeror's Printed/Typed Name    Au  | conform to the terms of the attac<br>in 40 CFR 262.27(a) (if I am a I | ched EPA Acknowle<br>arge quantity gene<br>Sign<br>Export from U | erator) or<br>nature   | (b) (if I am a small  | ry/exit:            | nerator) is true.                         | ~                           | Mon  | B Bay  | 18<br>  Year   |
| TRANSPORTER INT'L | General Section 17. Transport Transport 18. Dis  | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment of certify that the waste minimization statement identified rator's/Offeror's Printed/Typed Name  Accomply  Accomply  Import to U.S. porter signature (for exports only):  ansporter Acknowledgment of Receipt of Materials porter in the property of the p | conform to the terms of the attac<br>in 40 CFR 262.27(a) (if I am a I | ched EPA Acknowle<br>arge quantity gene<br>Sign<br>Export from U | erator) or<br>nature   | (b) (if I am a small  | ry/exit:            | nerator) is true.                         | ection                      | Mon  | B Bay  | Year<br>Year   |
| TRANSPORTER       | General Genera | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment of certify that the waste minimization statement identified rator's/Offeror's Printed/Typed Name  CACL HOMESON Import to U.S. porter signature (for exports only): ansporter Acknowledgment of Receipt of Materials porter 2 Printed/Typed Name  screpancy Indication Space   | conform to the terms of the attac<br>in 40 CFR 262.27(a) (if I am a I | ched EPA Acknowle<br>arge quantity gene<br>Sign<br>Export from U | erator) or<br>nature<br>.s.  | Port of entr<br>Date leavin                                   | ry/exit:<br>g U.S.: | 7/  |                             | Mon  | th Day   | Year<br>Year   |
| TRANSPORTER       | General 16. Into Transp 17. Transp 18. Dis 18a. D  | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment of certify that the waste minimization statement identified rator's/Offeror's Printed/Typed Name  CACL HOMES IMPOSED  Import to U.S. porter signature (for exports only): ansporter Acknowledgment of Receipt of Materials porter 1 Printed/Typed Name  porter 2 Printed/Typed Name  screpancy Discrepancy Indication Space Quantity  Ulternate Facility (or Generator)   | conform to the terms of the attac<br>in 40 CFR 262.27(a) (if I am a I | ched EPA Acknowle<br>arge quantity gene<br>Sign<br>Export from U | erator) or<br>nature<br>.s.  | Port of entr<br>Date leavin                                   | ry/exit:<br>g U.S.: | Partial Rej                               |                             | Mon  | th Day   | Year<br>Year   |
| TRANSPORTER       | General 16. Internal 17. Transp. Transp. 18. Dis 18a. D. 18b. Al Facility 18c. Si  | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment identified cator's/Offeror's Printed/Typed Name  CALL HOMESON  Import to U.S. porter signature (for exports only): ansporter Acknowledgment of Receipt of Materials contert Printed/Typed Name  Scorter 2 Printed/Typed Name  Scorter 2 Printed/Typed Name  Scorter 3 Printed/Typed Name  Scorter 4 Printed/Typed Name  Scorter 5 Printed/Typed Name  Scorter 6 Printed/Typed Name  Scorter 7 Printed/Typed Name  Scorter 8 Printed/Typed Name  Scorter 9 Printed/Typed Name  Scorter 9 Printed/Typed Name  Scorter 1 Printed/Typed Name  Scorter 1 Printed/Typed Name  Scorter 1 Printed/Typed Name  Scorter 2 Printed/Typed Name  Scorter 3 Printed/Typed Name  Scorter 4 Printed/Typed Name  Scorter 5 Printed/Typed Name  Scorter 6 Printed/Typed Name  Scorter 7 Printed/Typed Name  Scorter 8 Printed/Typed Name  Scorter 9 Printed/Typed Name  Scorter 1 Printed/Typed Name  | conform to the terms of the attack in 40 CFR 262.27(a) (if I am a I   | ched EPA Acknowlearge quantity gene Sign  Export from U  Sign    | erator) or nature  .sature  .ature   | Port of entr<br>Date leavin                                   | ry/exit:<br>g U.S.: | Partial Rej                               |                             | Mon  | th Day th Day                                  | Year<br>Year   |
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| TRANSPORTER       | General 16. Intransport 17. Transport 18. Discussion 18a. Discussion 18a. Discussion 18b. All 18b. All 1. 20. De   | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment identified ator's/Offeror's Printed/Typed Name  CALL HOMESON Import to U.S. porter signature (for exports only): ansporter Acknowledgment of Receipt of Materials content in the printed/Typed Name  Scorter Printed/Typed Name  Scorter 2 Printed/Typed Name  Scorepancy Discrepancy Indication Space Quantity  Alternate Facility (or Generator)  Sy's Phone: Signature of Alternate Facility (or Generator)  Azardous Waste Report Management Method Codes (i.e., paginature of Facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of receiptions and the printed facility Owner or Operator: Certification of the printed facility Owner or Operator: | conform to the terms of the attack in 40 CFR 262.27(a) (if I am a I   | eatment, disposal  | erator) or nature  S.  Sature  Maintaine  Ma | Port of entr<br>Date leavin  Residue  anifest Reference       | ny/exit:<br>g U.S.: | Partial Rej                               |                             | Mon L  | th Day th Day The Day                          | Year Year Stion  |
| TRANSPORTER       | General 16. Intransport 17. Transport 18. Discussion 18a. Discussion 18a. Discussion 18b. All 18b. All 1. 20. De   | marked and labeled/placarded, and are in all respects in Exporter, I certify that the contents of this consignment identified rator's/Offeror's Printed/Typed Name  CALL HOMES IMPORTAGE INTERIOR INTERIO | conform to the terms of the attack in 40 CFR 262.27(a) (if I am a I   | eatment, disposal  | erator) or nature  S.  Sature  Ma  | Port of entr<br>Date leavin  Residue  anifest Reference       | Number:             | Partial Rej                               |                             | Mon I  | th Day th Day The Day                          | Year Year Year   |

| lea                 | se print or type. (Form designed for use on elite (12-pitch) typewriter.)   |  |                     |  |               |                       |                      | n Approved. C | MB No. 205     | 0-0039      |
|---------------------|---|--|---------------------|--|---------------|-----------------------|----------------------|---------------|----------------|-------------|
| $\uparrow$          | UNIFORM HAZARDOUS WASTE MANIFEST WAD980738545   | 2. Page 1 of                                 |                     |  | 77-26         | 5₫ <b>00</b> (        |                      |               | DA             | T           |
|                     | Generator 5 Friorie.  | )6)382-8379                                  | ALASKA<br>628 S     | Site Address (i<br>N COPPER I<br>HANFORD<br>E VA 98134 | <i>I</i> ORKS | an mailing addre      | ,                    |               |                |             |
| Н                   | 6. Transporter 1 Company Name   | _  |                     |  |               | U.S. EPA ID           |                      | 357           |                |             |
| $\mathbf{H}$        | Stericycle Specialty Waste Solutions  | Inc  |                     |  |               |                       |                      | 124           |                |             |
|                     | 7. Transporter 2 Company Name   |  | _                   |  |               | U.S. EPA ID           | Number               |               |                |             |
|                     | 8. Designated Facility Name and Site Address  |  | ·········           |  |               | U.S. EPA ID           | Number               |               |                |             |
| П                   | DURLINGTON ENVIRONMENTAL, LLC. TACOMA PLANT   |  |                     | 1  |               |                       |                      |               |                | 1           |
| П                   | 1701 East Alexander Avenue  |  |                     | ,  |               | 1 1100                | 0000                 | 3015          |                |             |
| П                   | Facility's Phone: TACOMA, WA 58421 (253) 527-7568   |  |                     | - E -  |               | WHD                   | 020257               | 7945          |                |             |
|                     | 9a. HM 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Nur and Packing Group (if any))  1  |  |                     | 10. Containe<br>No.                                    | ers<br>Type   | 11. Total<br>Quantity | 12. Unit<br>Wt./Vol. |               | ste Codes      |             |
| GENERATOR -         | 1. UN1993 WASTE FLAMMARLE LIQUIDS, N.O.S. (PETROLE<br>X XYLENE) 3 PGII RO(DB01)   | UN DISTILLAT                                 | TES,                | 1  | DM            | 80                    | Б                    | D081          |                |             |
| ER<br>FR            | 2. ,  |  |                     |  |               |                       |                      |               |                |             |
|                     | 3.  |  |                     | 9<br><br>**  |               |                       |                      |               |                |             |
|                     | 4.  |  |                     |  |               |                       |                      |               |                |             |
|                     |   |  |                     |  |               |                       |                      |               |                |             |
|                     | 14. Special Handling Instructions and Additional Information (1) 185807-11 - ERG(128) AEROSOL CAN WASTE   | ***  |                     |  |               |                       |                      |               |                |             |
|                     | <b></b>   |  |                     |  |               |                       |                      |               |                |             |
|                     | 15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents marked and labeled/placarded, and are in all respects in proper condition for transportant contents of this consignment conform to the terms of the air certify that the waste minimization statement identified in 40 CFR 262.27(a) (if I am | ort according to appli<br>ttached EPA Acknow | icable internatived | tional and natio<br>Consent.                           | nal governm   | ental regulations     |                      |               |                | d,          |
| $\Big $             | Generator's/Offeror's Printed/Typed Name  |  | nature              | - Esu  |               |                       |                      | Month<br>  2  | Day<br>- 12-31 | Year<br>/ 8 |
| Ē                   | 16. International Shipments Import to U.S.  | Export from                                  | U.S.                | Port of entr   |               |                       |                      |               |                |             |
| =                   | Transporter signature (for exports only):   |  |                     | Date leavin  | g U.S.:       |                       |                      |               |                |             |
| IRANSPORTER         | 17. Transporter Acknowledgment of Receipt of Materials  Transporter 1 Printed/Typed Name  | Sin  | nature              |  |               |                       |                      | Month         | Day            | Year        |
| Š                   | Theodore Chile  | <br>   | -                   | - C  |               |                       |                      | 17            | 1231           | 18          |
| S                   | Transporter 2 Printed/Typed Name  | Sig  | nature              |  |               |                       |                      | Month         | Day            | Year        |
| 3                   |   |  |                     |  |               |                       |                      |               | 1 1            |             |
| t                   | 18. Discrepancy   |  |                     |  |               |                       |                      |               |                |             |
| ľ                   | 18a. Discrepancy Indication Space Quantity Type   | e  |                     | Residue  |               | Partial Re            | ejection             |               | Full Rejectio  | on          |
| י<br><u>≻</u>       | 18b. Alternate Facility (or Generator)  | · · · · · · · · · · · · · · · · · · ·        | Mani                | fest Reference   | Number:       | U.S. EPA ID           | Number               |               |                |             |
| ACILII              |   |  |                     |  |               |                       |                      |               |                |             |
| DESIGNATED FACILITY | Facility's Phone: 18c. Signature of Alternate Facility (or Generator)   |  |                     |  |               |                       |                      | Mont          | h Day          | Year        |
| 5                   | 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous wast  | e treatment, disposa                         | al, and recycl      | ing systems)   |               |                       |                      |               |                |             |
| Ä<br>·              | 1 HO(01 2   | 3.   | <u> </u>            | _  |               | 4.                    |                      |               |                |             |
| l                   | 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials  | covered by the man                           | ifest except        | s noted in Item  | 18a           | L                     |                      |               |                |             |
|                     | Printed Typed Name  Weed in   |  | gnature             | Hus  | 100           | bes                   | 2<br>2               | Mont          | 212714         | XEET,       |
| PA                  | Form 8700-22 (Rev. 3-05) Previous editions are obsolete.  |  | DESIGN              | VATED FA   | CILITY        | TO DESTI              | NATION               | STATE (       | F REQU         | IRED        |

| 876092-16   | RECEIVED   | FEB 22 :                        | 201 <b>3</b> |                       | 30566                      |              | 16 '18                       | am <b>9:</b> 1                        |
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| ease print or type. (Form designed for use on elite (12-pitch) typewriter.)   |  |                                 |              |                       |                            | n Approved   | . OMB No.                    | 2050-003                              |
| UNIFORM HAZARDOUS WASTE MANIFEST LAD980738545   | 2. Page 1 of 3. Eme  | (877) 5                         | 77-26        |                       | 19                         | 724          | 2 D                          | AT                                    |
| 5. Generator's Name and Mailing Address  PLASKAN COPPER HORKS ATTH JERR Y THOMPSON  | ALASI  | IAN COPPER I                    | •            | han mailing addres    | is)                        |              |                              |                                       |
| P.O. Jox 3546   | 1  | HANFORD                         |              |                       |                            |              |                              |                                       |
| Generator's Phone: Seattle MA 98174 [2] 6. Transporter 1 Company Name   | 16)382-8379   SEATT  | LE WR 9813                      | <u> </u>     | U.S. EPAID N          | lumber                     |              |                              |                                       |
| Stericycle Specialty Waste Solutions  | Tnc  |                                 |              | MNSOO                 | 01109                      | 324          |                              |                                       |
| 7. Transporter 2 Company Name   |  |                                 |              | U.S. EPAID N          | lumber                     |              |                              |                                       |
| 8. Designated Facility Name and Site Address  |  |                                 |              | U.S. EPA ID N         | lumber                     |              |                              |                                       |
| HURLINGTON ENVIRONMENTAL, LLC. TACOMA PLANT<br>1781 East Alexander Avenue<br>Facilitys Phone: Tacoma, VA 88421 (253) 527-7568   | ·  |                                 |              | l wane                | /<br>12025]                | 7945         |                              |                                       |
| 9a. 9b. U.S. DOT Description (including Proper Shipping Name, Hazard Class, ID Nu and Packing Group (if any))   | mber,  | 10. Contain<br>No.              | ers<br>Type  | 11. Total<br>Quantity | 12. Unit<br>Wt./Vol.       |              | Waste Code                   | es                                    |
| 1. NA3882 HAZARBOUS WASTE, LIQUID, N.O.S. (DB87)  | PGIII RO(18LBS)  | 140.                            | Type         |                       | VII.3 VO.                  | D007         |                              | <u> </u>                              |
| RC  |  | 1                               | TT           | 881                   | G                          |              |                              |                                       |
| 2.  |  |                                 |              |                       |                            |              |                              |                                       |
| 3.  |  |                                 |              |                       |                            |              |                              | ļ                                     |
|   |  |                                 |              |                       |                            |              |                              |                                       |
| 4.  |  |                                 |              |                       |                            |              |                              |                                       |
|   |  |                                 |              |                       |                            |              |                              | ļ                                     |
| 14. Special Handling Instructions and Additional Information  |  |                                 |              | <u> </u>              | <u> </u>                   |              |                              |                                       |
| P.O. # 14/05    15. GENERATOR'S/OFFEROR'S CERTIFICATION: I hereby declare that the contents marked and labeled/plácarded, and are in all respects in proper condition for transport Exporter, I certify that the contents of this consignment conform to the terms of the a Lertify that the waste minimization stategment identified in 40 CFR 262.27(a) (if I am Gegerator's/Offeror's Printed/Typed Name | ort according to applicable inte<br>ttached EPA Acknowledgment | mational and nation of Consent. | onal governr | nental regulations.   | pping name<br>If export sh | ipment and I | ssified, pack<br>am the Prim | ary                                   |
| Gerzio Thompson   |  | 1                               |              | >                     |                            | C            | 2/16                         |                                       |
| 16. International Shipments Import to U.S.  Transporter signature (for exports only):   | Export from U.S.   | Port of enti<br>Date leavin     |              |                       |                            |              |                              |                                       |
| 17. Transporter Acknowledgment of Receipt of Materials  |  | 7                               |              |                       | 1                          |              |                              |                                       |
| Transporter 1 Printed/Typed Name  | Signature  | ),                              | _/           |                       | K                          | Moi          | nth Day<br>フリック              | Year                                  |
| Transporter 2 Printed/Typed Name  | Signature  |                                 |              |                       | <u> </u>                   | Mo           | nth Day                      |                                       |
|   |  |                                 |              |                       |                            | - 1          |                              |                                       |
| 18. Discrepancy   |  |                                 |              |                       |                            |              |                              |                                       |
| 18a. Discrepancy Indication Space Quantity Type   | •  | Residue                         |              | Partial Reje          | ection                     |              | Full Rej                     | ection                                |
| 18b. Alternate Facility (or Generator)  | Ma   | inifest Reference               | Number:      | U.S. EPA ID N         | umber                      |              |                              | · · · · · · · · · · · · · · · · · · · |
| Facility's Phone:   |  |                                 |              |                       |                            |              |                              |                                       |
| 18c. Signature of Alternate Facility (or Generator)   |  |                                 |              |                       |                            | Mo           | onth Day                     | / Yea                                 |
| 19. Hazardous Waste Report Management Method Codes (i.e., codes for hazardous wast  | e treatment, disposal, and rec                                 | ycling systems)                 |              |                       |                            |              |                              |                                       |
| H070 2  | 3.   |                                 |              | 4.                    |                            |              |                              |                                       |
| 20. Designated Facility Owner or Operator: Certification of receipt of hazardous materials Printed Note: Name   | covered by the manifest excep                                  | ot as noted in Item             | 18a          | <del>}</del>          | 1                          | Mo           | nth Day                      | Year.                                 |
| Form 8700-22 (Rev. 3-05) Previous editions are obsolete.  | DESI   | NATED FA                        | CILITY       | TO DESTIN             | 1 //                       | STATE        | (IF REC                      | UIRE                                  |



## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY) 01/31/2018

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

|                                |                     |             | CONTACT               |                                  |                   |               |
|--------------------------------|---------------------|-------------|-----------------------|----------------------------------|-------------------|---------------|
| PRODUCER                       |                     |             | NAME:                 | Carla Liberty                    |                   |               |
| Cushman Insurance Agency, Inc  | c. (All Other)      |             | PHONE<br>(A/C, No, Ex | t): (703)464-5727                | FAX<br>(A/C, No): | (703)774-3404 |
| DRC Insurance Agency, Inc. (Tr | uckers/Pollution)   |             | E-MAIL<br>ADDRESS:    | cliberty@drcagency.com           |                   |               |
| 773 Station Street             |                     |             |                       | INSURER(S) AFFORDING COVERAGE    |                   | NAIC#         |
| Herndon                        | V                   | 20170       | INSURER A             | : Valley Forge Ins Co            |                   | 20508         |
| INSURED                        |                     |             | INSURER B             | ; St. Paul Fire & Marine Ins. Co |                   | 24767         |
| World Resource                 | s Company           |             | INSURER C             | : Transportation Ins Co          |                   | 20494         |
| PO BOX 7460                    |                     |             | INSURER D             |                                  |                   |               |
|                                |                     |             | INSURER E             | Arch Insurance Co.               |                   | Truckers      |
| Jackson                        | w                   | Y 83002     | INSURER F             | :                                |                   |               |
| COVERAGES                      | CERTIFICATE NUMBER: | CL181301461 | 4                     | REVISION NUM                     | IBER:             |               |

| 11          | HIS IS TO CERTIFY THAT THE POLICIES OF<br>IDICATED. NOTWITHSTANDING ANY REQU<br>ERTIFICATE MAY BE ISSUED OR MAY PERT | REME  | NT, TI | ERM OR CONDITION OF ANY CONTR              | ACT OR OTHER               | R DOCUMENT I               | MTH RESPECT TO WHICH T                                    | HIS                        |
|-------------|--|-------|--------|--|----------------------------|----------------------------|---|----------------------------|
|             | XCLUSIONS AND CONDITIONS OF SUCH PO  |       |        |  | ED BY PAID C               | LAIMS.                     | OBJECT TO ALL THE TERMS                                   | ,                          |
| INSR<br>LTR | TYPE OF INSURANCE  |       | SUBR   |  | POLICY EFF<br>(MM/DD/YYYY) | POLICY EXP<br>(MM/DD/YYYY) | LIMIT   | S                          |
|             | COMMERCIAL GENERAL LIABILITY  CLAIMS-MADE CCCUR  |       |        |  |                            |                            | EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) | \$ 1,000,000<br>\$ 100,000 |
|             | Blanket Additional Insured   |       |        |  |                            |                            | MED EXP (Any one person)                                  | \$ 5,000                   |
| Α           |  |       | l      | 2075845509                                 | 02/01/2018                 | 02/01/2019                 | PERSONAL & ADV INJURY                                     | s 1,000,000                |
|             | GEN'L AGGREGATE LIMIT APPLIES PER:   |       |        |  |                            |                            | GENERALAGGREGATE  | s 2,000,000                |
|             | POLICY PRO-  |       |        |  |                            |                            | PRODUCTS - COMP/OP AGG                                    | \$ 2,000,000               |
|             | OTHER:   |       |        |  |                            |                            | Stopgap   | \$ 1,000,000               |
|             | AUTOMOBILE LIABILITY   |       |        |  |                            |                            | COMBINED SINGLE LIMIT<br>(Ea accident)                    | \$ 1,000,000               |
|             | ANY AUTO   | Ì     |        |  |                            |                            | BODILY INJURY (Per person)                                | \$                         |
| Α           | OWNED SCHEDULED AUTOS ONLY   |       |        | 2075845512                                 | 02/01/2018                 | 02/01/2019                 | BODILY INJURY (Per accident)                              | \$                         |
|             | HIRED NON-OWNED AUTOS ONLY   | l     |        |  |                            |                            | PROPERTY DAMAGE<br>(Per accident)                         | \$                         |
|             | MCS 90 End Truckers-pg2  |       |        |  |                            |                            |   | \$                         |
|             | ✓ UMBRELLA LIAB     ✓ OCCUR  |       |        |  |                            |                            | EACH OCCURRENCE   | \$ 10,000,000              |
| В           | EXCESS LIAB CLAIMS-MADE  |       |        | ZUP-12R85286-18-NF                         | 02/01/2018                 | 02/01/2019                 | AGGREGATE   | s 10,000,000               |
|             | DED RETENTION \$ 10,000  |       |        |  |                            |                            |   | \$                         |
|             | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY  | Ì     |        |  |                            |                            | ➤ PER OTH-ER  |                            |
| С           | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?  | N/A   |        | 4020529262                                 | 02/01/2018                 | 02/01/2019                 | E.L. EACH ACCIDENT  | \$ 500,000                 |
|             | (Mandatory in NH)  |       |        |  |                            |                            | E.L. DISEASE - EA EMPLOYEE                                | \$ 500,000                 |
|             | If yes, describe under DESCRIPTION OF OPERATIONS below   |       |        |  |                            |                            | E.L. DISEASE - POLICY LIMIT                               | s 500,000                  |
| D           | Pollution Liability  |       |        | 37250705                                   | 02/01/2013                 | 02/01/2016                 | \$10,000,000 Occurrence                                   | \$40,000,000               |
| DESC        | RIPTION OF OPERATIONS / LOCATIONS / VEHICLE  | S (AC | ORD 10 | 31, Additional Remarks Schedule, may be at | tached if more sp          | ace is required)           |   |                            |

| CERTIFICATE HOLDER                            |               | CANCELLATION   |
|---|---------------|--|
| Alaskan Copper Works<br>P.O. Box 3546         |               | SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
| ,,, <b>,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |               | AUTHORIZED REPRESENTATIVE  |
| Seattle                                       | WA 98124-3546 | Da Cush  |
|   |               | © 1988-2015 ACORD CORPORATION. All rights reserved.  |

ACORD 25 (2016/03)

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## **COMMENTS/REMARKS**

Truckers Policy #FCBAT0061312
Carrier: Arch Insurance Co. (Co. E on Front of Certificate)
Effective: 02/01/2018 to 02/01/2019
Liability Limit: \$1,000,000

OFREMARK

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## \*\*\*FOR 24 HOUR EMERGENCY RESPONSE INFORMATION, CALL (877) 577-2669 \*\*\* 3347087

|                   |          | NON-HAZARDOUS<br>WASTE MANIFEST  | 1. Generator's US     | EPA ID No.                 | Manifest Doc. No. 394243-18 | 1               |                       |                                   |                |
|-------------------|----------|--|-----------------------|----------------------------|-----------------------------|-----------------|-----------------------|-----------------------------------|----------------|
| $\overline{lack}$ | 3.       | Generator's Name and Mailing Address   | ILAL                  |                            | 1 3742 10 10                | -               |                       |                                   |                |
| TI                |          | Washington State D   | epartment o           | of Ecology                 |                             |                 |                       |                                   |                |
|                   |          | 4700 Colorado Ave<br>Generator's Phone ( CEATT E HA  |                       |                            |                             |                 |                       |                                   |                |
| 1 -               |          | Transporter 1 Company Name   | 98134 (253            | 6. US EPA ID               | Number                      | A. Transport    | or's Phone            |                                   |                |
| 11                | 5.       | CASCADE DRILLING   | ĺ                     | CESQ6                      | Number                      |                 | ers Phone<br>5)485–89 | MP                                |                |
| 1†                | 7.       | Transporter 2 Company Name   |                       | 8. US EPA ID               | Number                      | B. Transport    |                       | VO                                |                |
| Ш                 |          | Stericycle Specialty W   | aste                  | MNS000110                  | 924                         | (61             | 2)285-98              | 65                                |                |
|                   | 9.       | Designated Facility Name and Site Address  |                       | 10. US EPA ID              | Number                      | C. Facility's F | Phone                 |                                   |                |
|                   |          | BURLINGTON ENVIRONMENT   | •                     |                            |                             |                 | f.                    |                                   |                |
| П                 | _        | 1701 East Alexander Av   |                       | WAD020257                  | 70.45                       | (25             | 3) 627-7              | 540                               |                |
| 11                | 11.      | Waste Shipping Name and Description  | 1421                  | #HDVZVZJZ                  | 4733                        |                 | Containers            | 13.                               | 14.            |
| Ш                 | ļ        |  |                       |                            |                             | N               | lo. Type              | Total<br>Quantity                 | Unit<br>Wt/Vol |
|                   | a.       | NATERIAL NOT REGULATED BY DOT  | (NON-HAZARDOUS)       |                            |                             |                 | DM                    |                                   | P              |
|                   |          |  |                       |                            |                             | 2               | _                     | 600                               |                |
| 1                 |          |  |                       | <u></u>                    |                             |                 |                       |                                   | _              |
| GEN               | b.       |  |                       |                            |                             |                 |                       |                                   |                |
| N<br>E<br>R       | l        |  |                       |                            |                             |                 |                       |                                   |                |
| A                 | C.       |  |                       |                            |                             |                 |                       |                                   |                |
| o<br>R            |          |  |                       |                            |                             |                 |                       |                                   |                |
| î                 | d.       |  |                       |                            |                             |                 |                       |                                   | _              |
|                   | ŭ.       |  |                       |                            |                             |                 |                       |                                   |                |
| Ш                 |          |  |                       |                            |                             |                 |                       |                                   |                |
| Ш                 | D.       | Additional Descriptions for Materials Listed Abo   | ve                    |                            |                             | 1 5             | g Codes for W         | astes Listed Ab                   | ove 🕰          |
| Ш                 |          | a) 981882-00 - NON-HAZARDOUS WASTE   | LIQUID - WATOS        | (1)                        |                             | HIM I           |                       |                                   | Ø              |
|                   | ĺ        |  |                       |                            |                             |                 | •                     |                                   | 30             |
| ╽                 | 15.      | Special Handling Instructions and Additional Info  | ormation              |                            |                             | J               |                       |                                   |                |
|                   |          | •  |                       |                            |                             |                 |                       |                                   |                |
| Ш                 | <br>     | 1 × 55   |                       |                            |                             |                 |                       |                                   |                |
|                   |          | 1×20   |                       |                            |                             |                 |                       |                                   |                |
|                   |          |  |                       |                            |                             |                 |                       |                                   |                |
|                   |          |  |                       |                            |                             |                 |                       |                                   |                |
|                   | 15       | GENERATOR'S CERTIFICATION. #1 barrer   | inglare that the see  | onto of this consister     | t are fully and accom       | ataly describe  | d about his           | oner chiesis                      | nama           |
|                   | 8        | GENERATOR'S CERTIFICATION: "I hereby of<br>and are classified, packaged, marked and lab<br>national governmental regulations." I also cert   | elled/placarded, and  | d are in all respects in p | roper condition for tr      | ansport accor   | rding to applic       | oper snipping<br>able internation | nal and        |
|                   |          | Printed/Typed Name   | my mat an limes list  | Signature                  | on suc.                     |                 |                       | Month Da                          | ay Year        |
| $\forall$         |          | Tamuras Cardonas   | for Etolocy           |                            | 1dbx                        |                 |                       | 1/014                             | -18            |
|                   | 17.      | Transporter 1 Acknowledgement of Receipt of  | Materials 3/7         | W 400                      | 771                         |                 |                       | -                                 |                |
| TRANSPORTER       |          | Printed/Typed Name   |                       | Signature                  | ML                          |                 |                       | Month D                           |                |
| P                 | 18.      | Transporter 2 Acknowledgement of Receipt of M  | fatoriale             | - MA                       | $-i\infty$                  |                 |                       | 1/018                             | 2 1/0          |
| Ř                 | $\vdash$ | Printed/Typed Name   | 11015                 | Signature                  |                             |                 |                       | Month D                           | ay Year        |
| R                 |          |  |                       |                            |                             |                 |                       |                                   |                |
| F                 | 19.      | Discrepancy Indication Space   |                       |                            |                             |                 |                       |                                   |                |
| A<br>C            |          | •  |                       |                            |                             |                 |                       |                                   |                |
| Ĺ                 | 20       | Facility Owner or Operator: Certification of recei   | ot of waste materials | covered by this manifes    | except as noted in it       | em 19           |                       |                                   |                |
| LITY              | _0.      | . admir of the control of the contro | v v                   | . Jordina by and mainted   |                             |                 |                       |                                   |                |
| Y                 |          | Printed/Typed Name   | 1.1                   | Signature                  | //                          | . /             | <del></del>           | Month D                           | зу Үеад        |
|                   | i        | revin  | a, Hone               | >                          |                             | <del>***</del>  | 4                     | Month Di                          | 8 118          |
| <u></u> ]         |          |  |                       |                            |                             |                 |                       |                                   |                |